Address

Telephone

Office Sought

Required to terminate

reporting obligations

## SECRETARY OF STATE Candidate REPORT OF RECEIPTS AND DISBURSEMENTS Senate District 36 Special Election Name of Candidate ELECTIONS DIVISION SECRETARY OF STAT DATESTAMP Political Party Check here if above is different from previous report TYPE OF REPORT March 2, 2010 Runoff Report (February 7, 2010 through February 27, 2010)......Runoff Candidates

## **IMPORTANT**

(1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.

Termination Report (Candidate will no longer accept contributions or make

campaign expenditures and has no outstanding campaign debt obligation)

- Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

## REPORTED CONTRIBUTIONS AND DISBURSEMENTS

Itemized + Non-itemized =		This Period	Calendar Year-To-Date
Total amount of contributions \$ ~0 ~ +\$	160.00 \$	160.00	\$ 14.200.00
Total amount of disbursements \$ 152120\$	2050	1592.20	\$ 14.07933
Total amount of cash on hand	\$	120,67	1
Signature of Candidate	he best of my know	ledge and belief it is true	, accurate, and complete.

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements. Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Candidates for Statewide, State district, mutil-county and all legislative offices should ruturn form to Secretary of State, Elections Division, P. O. Box 136, Jackson,

2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

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Name of Candidate or Committee Jimmy 51 (Ing.)

Reporting period 2-28-2010 through 4-30-2010

## ITEMIZED DISBURSEMENTS

Part Gibson Reville	Date (Mo., Day, Year)	Amount of each disbursement this period
Malling Address 3	2,1,10	\$ 160.00
Purpose of Disbursement Optional)	_'_'_	s
Purpose of Disbursement Optional)  Advertising	Aggregate Year-to-date	\$ 160.00
John Morgan Hughes	Date (Mc., Day, Year)	Amount of each disbursement this period
Malling Address 01 Russell St.	3,1,10	\$ 500,00
Starkville MS 39762	_/_/_	S
Purpose of Disbursement (Optional)  am paign Monager	Aggregate Year-to-date	\$ 1661.08
Super Talk Radio	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing, Address  (3) Ridge wood Rel  City, State, Zip Code	31110	\$ 550,00
Sackson MS 39211-2035	_'_'_	S
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 550,00
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address O Bop 973	3,2,10	\$ 1/6.00
City, State, Zip Code		S
Fauette, MS 39069	-/-/-	
Purpose of Visbursement (Optional)	Aggregate Year-to-date	\$ 116.00
Purpose of disbursement (Optional)  E Full name  D DI Oh COUNTY COUNTY	Aggregate Year-to-date Date (Mo., Day, Year)	S //6_00 Amount of each disbursement this period
Purpose of Visbursement (Optional)  Halling Andrews  Mailing Andrews  To a County County  Mailing Andrews  To a County  To	Year-to-date Date	Amount of each
Purpose of Gisbursoment (Optional)  All ertising  E. Full name  Doigh County Counter  Mailing Address Boo 351	Year-to-date Date (Mo., Day, Year)	Amount of each disbursement this period
Purpose of Viebursement (Optional)  E. Eull name  D. Diah County Counter  Mailing Andreas  Doo 351	Year-to-date Date (Mo., Day, Year)	Amount of each disbursement this period  \$ 24570
Purpose of Visbursement (Optional)  Purpose of Visbursement (Optional)  All ertising  E. Full name  Doi ah County County  Mailing Address  Box 351  City, State, Zip Code  Hazlewist, MS 39083	Year-to-date  Date (Mo., Day, Year)  4/2/1/0  Aggregate	Amount of each disbursement this period  \$ 24570
Purpose of Disbursement (Optional)  Leftsine  E. Full name  Do piah County Counter  Mailing Address  O. Box 35/  City, State, Zlp Code  Hazle hurst MS 39083  Purpose of Disbursement (Optional)	Year-to-date  Date (Mo., Day, Year)  Line (Mo., Day, Year)  Aggregate Year-to-date  Date	Amount of each disbursement this period  \$ 245.70 \$ \$ 708.75 Amount of each
Purpose of Visbursement (Optional)  All ertising  E. Eull name  Walling Andrees  O. Box 351  City, State, Zip Code  #421etwist MS 39083  Purpose of Disbursement (Optional)  F. Full name	Year-to-date  Date (Mo., Day, Year)  Lilio Aggregate Year-to-date  Date (Mo., Day, Year)	Amount of each disbursement this period  \$ 245.70 \$ Amount of each disbursement this period